		Paper No.:
DATE	: March 1, 2007	· · · · · · · · · · · · · · · · · · ·
TO SPE OF	: ART UNIT <u>1626</u>	
SUBJECT	: Request for Certificate of Cort	rection on Patent No.: <u>7161007 B2</u>
A response is	s requested with respect to the	e accompanying request for a certificate of correction.
Please com	plete this form and return w	ith file, within 7 days to:
Palm location	on 7580, Certificates of Co	rrection Branch – South Tower – 9A22
If response	is for an IFW, return to em	ployee (named below) via PUBSCofC Team in
With respect		orrecting Office and/or Applicant's errors, should the orrection (COCIN)? No new matter should be introduced, nor hanged.
		Elisha Evans
Thank You Fo	or Your Assistance	Certificates of Correction Branch
•	t for issuing the above-ide	Tel. No. 703-308-9390 EXT 110
Note your decision	Approved	
Note your decision	n on the appropriate box.	entified correction(s) is hereby:
Note your decision	Approved	entified correction(s) is hereby: All changes apply.
Note your decision	Approved in Part Denied	entified correction(s) is hereby: All changes apply. Specify below which changes do not apply.
Note your decision	Approved in Part Denied	entified correction(s) is hereby: All changes apply. Specify below which changes do not apply.
Note your decision	Approved in Part Denied	entified correction(s) is hereby: All changes apply. Specify below which changes do not apply.
Note your decision	Approved in Part Denied	entified correction(s) is hereby: All changes apply. Specify below which changes do not apply.
Note your decision	Approved Approved in Part Denied	entified correction(s) is hereby: All changes apply. Specify below which changes do not apply.
Note your decision	Approved Approved in Part Denied	All changes apply. Specify below which changes do not apply. State the reasons for denial below. State the reasons for denial below.
Note your decision	Approved Approved in Part Denied	All changes apply Specify below which changes do not apply. State the reasons for denial below.